

<i>SERFF Tracking Number:</i>	<i>WESA-125867615</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Tokio Marine &amp; Nichido Fire Insurance Co., Ltd.</i>	<i>State Tracking Number:</i>	<i>#? \$50</i>
<i>Company Tracking Number:</i>	<i>08-AR-3-CF-25-1</i>		
<i>TOI:</i>	<i>01.0 Property</i>	<i>Sub-TOI:</i>	<i>01.0001 Commercial Property (Fire and Allied Lines)</i>
<i>Product Name:</i>	<i>Commercial Property</i>		
<i>Project Name/Number:</i>	<i>Commercial Property ISO Non-Adoption Submission/08-AR-3-CF-25-1</i>		

## Filing at a Glance

Company: Tokio Marine & Nichido Fire Insurance Co., Ltd.

Product Name: Commercial Property

SERFF Tr Num: WESA-125867615 State: Arkansas

TOI: 01.0 Property

SERFF Status: Closed

State Tr Num: #? \$50

Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)

Co Tr Num: 08-AR-3-CF-25-1

State Status: Fees verified

Filing Type: Form

Co Status:

Reviewer(s): Betty Montesi,  
Llyweyia Rawlins

Author: Westmont Associates

Disposition Date: 10/24/2008

Date Submitted: 10/22/2008

Disposition Status: Non-Adoption

Effective Date Requested (New): 01/01/2009

Effective Date (New): 01/01/2009

Effective Date Requested (Renewal): 01/01/2009

Effective Date (Renewal):  
01/01/2009

State Filing Description:

## General Information

Project Name: Commercial Property ISO Non-Adoption Submission

Project Number: 08-AR-3-CF-25-1

Status of Filing in Domicile: Not Filed

Domicile Status Comments: This filing has not been submitted in the state of New York.

Reference Organization: ISO

Reference Number: CL-2008-OWEFO

Reference Title: Multistate Water Exclusion Endorsements

Advisory Org. Circular: LI-CF-2008-215

Filing Status Changed: 10/24/2008

State Status Changed: 10/24/2008

Deemer Date:

Corresponding Filing Tracking Number: 08-AR-2-CF-26-1

Filing Description:

Non-Adoption of ISO Circulars LI-CF-2008-215 (Multistate Water Exclusion Forms)

## Company and Contact

SERFF Tracking Number: WESA-125867615 State: Arkansas

Filing Company: Tokio Marine & Nichido Fire Insurance Co., Ltd. State Tracking Number: #? \$50

Company Tracking Number: 08-AR-3-CF-25-1

TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)

Product Name: Commercial Property

Project Name/Number: Commercial Property ISO Non-Adoption Submission/08-AR-3-CF-25-1

### Filing Contact Information

(This filing was made by a third party - westmontassociatesinc)

Jennifer Waldron, Supervisor jenb@westmontlaw.com  
 25 Chestnut Street (856) 216-0220 [Phone]  
 Haddonfield, NJ 08033 (856) 216-0303[FAX]

### Filing Company Information

Tokio Marine & Nichido Fire Insurance Co., Ltd. CoCode: 12904 State of Domicile: New York  
 230 Park Avenue Group Code: 3098 Company Type:  
 New York, NY 10169 Group Name: State ID Number:  
 (212) 297-6600 ext. [Phone] FEIN Number: 13-6108722  
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### Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: Standard Filing Fee for Forms.  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Tokio Marine & Nichido Fire Insurance Co., Ltd.	\$0.00	10/22/2008	

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
31222	\$50.00	10/21/2008

*SERFF Tracking Number:*      *WESA-125867615*      *State:*      *Arkansas*  
*Filing Company:*      *Tokio Marine & Nichido Fire Insurance Co., Ltd.* *State Tracking Number:*      *#? \$50*  
*Company Tracking Number:*      *08-AR-3-CF-25-1*  
*TOI:*      *01.0 Property*      *Sub-TOI:*      *01.0001 Commercial Property (Fire and Allied Lines)*  
*Product Name:*      *Commercial Property*  
*Project Name/Number:*      *Commercial Property ISO Non-Adoption Submission/08-AR-3-CF-25-1*

## Correspondence Summary

### Dispositions

<b>Status</b>	<b>Created By</b>	<b>Created On</b>	<b>Date Submitted</b>
Non-Adoption Llyweyia Rawlins		10/24/2008	10/24/2008

*SERFF Tracking Number:* WESA-125867615 *State:* Arkansas  
*Filing Company:* Tokio Marine & Nichido Fire Insurance Co., Ltd. *State Tracking Number:* #? \$50  
*Company Tracking Number:* 08-AR-3-CF-25-1  
*TOI:* 01.0 Property *Sub-TOI:* 01.0001 Commercial Property (Fire and Allied Lines)  
*Product Name:* Commercial Property  
*Project Name/Number:* Commercial Property ISO Non-Adoption Submission/08-AR-3-CF-25-1

## Disposition

Disposition Date: 10/24/2008

Effective Date (New): 01/01/2009

Effective Date (Renewal): 01/01/2009

Status: Non-Adoption

Comment: Non-Adoption of ISO Circulars LI-CF-2008-215 (Multistate Water Exclusion Forms)

Filing is contingent on receiving the filing fees the company indicates in the filing that they have sent.

Rate data does NOT apply to filing.

SERFF Tracking Number: WESA-125867615 State: Arkansas

Filing Company: Tokio Marine & Nichido Fire Insurance Co., Ltd.State Tracking Number: #? \$50

Company Tracking Number: 08-AR-3-CF-25-1

TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)

Product Name: Commercial Property

Project Name/Number: Commercial Property ISO Non-Adoption Submission/08-AR-3-CF-25-1

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property &Non-adoption Casualty		Yes
Supporting Document	Cover Letter	Non-adoption	Yes
Supporting Document	Letter of Authorization	Non-adoption	Yes

<i>SERFF Tracking Number:</i>	<i>WESA-125867615</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Tokio Marine &amp; Nichido Fire Insurance Co., Ltd.</i>	<i>State Tracking Number:</i>	<i>#? \$50</i>
<i>Company Tracking Number:</i>	<i>08-AR-3-CF-25-1</i>		
<i>TOI:</i>	<i>01.0 Property</i>	<i>Sub-TOI:</i>	<i>01.0001 Commercial Property (Fire and Allied Lines)</i>
<i>Product Name:</i>	<i>Commercial Property</i>		
<i>Project Name/Number:</i>	<i>Commercial Property ISO Non-Adoption Submission/08-AR-3-CF-25-1</i>		

## Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: WESA-125867615 State: Arkansas  
Filing Company: Tokio Marine & Nichido Fire Insurance Co., Ltd.State Tracking Number: #? \$50  
Company Tracking Number: 08-AR-3-CF-25-1  
TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)  
Product Name: Commercial Property  
Project Name/Number: Commercial Property ISO Non-Adoption Submission/08-AR-3-CF-25-1

## Supporting Document Schedules

**Satisfied -Name:** Uniform Transmittal Document-Property & Casualty  
**Review Status:** Non-adoption 10/24/2008  
**Comments:**  
**Attachment:**  
AR NAIC.pdf

**Satisfied -Name:** Cover Letter  
**Review Status:** Non-adoption 10/24/2008  
**Comments:**  
Attached is the cover letter for this submission.  
**Attachment:**  
AR-F.pdf

**Satisfied -Name:** Letter of Authorization  
**Review Status:** Non-adoption 10/24/2008  
**Comments:**  
Attached is the Letter of Authorization.  
**Attachment:**  
TMNF (8-1-08).pdf

## Property &amp; Casualty Transmittal Document

<b>1. Reserved for Insurance Dept. Use Only</b>	<b>2. Insurance Department Use only</b>	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
	g. SERFF Filing #:	
h. Subject Codes		

<b>3. Group Name</b>					<b>Group NAIC #</b>
<b>4. Company Name(s)</b>	<b>Domicile</b>	<b>NAIC #</b>	<b>FEIN #</b>	<b>State #</b>	

<b>5. Company Tracking Number</b>	
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

<b>6. Name and address</b>	<b>Title</b>	<b>Telephone #s</b>	<b>FAX #</b>	<b>e-mail</b>
<b>7. Signature of authorized filer</b>				
<b>8. Please print name of authorized filer</b>				

Filing information (see General Instructions for descriptions of these fields)

<b>9. Type of Insurance (TOI)</b>				
<b>10. Sub-Type of Insurance (Sub-TOI)</b>				
<b>11. State Specific Product code(s)(if applicable)[See State Specific Requirements]</b>				
<b>12. Company Program Title (Marketing title)</b>				
<b>13. Filing Type</b>	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)			
<b>14. Effective Date(s) Requested</b>	New:		Renewal:	
<b>15. Reference Filing?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>16. Reference Organization (if applicable)</b>				
<b>17. Reference Organization # &amp; Title</b>				
<b>18. Company's Date of Filing</b>				
<b>19. Status of filing in domicile</b>	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved			



## Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	
21.	<b>Filing Description</b> [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]	

[illegible]

\*\*\*Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

**FORM FILING SCHEDULE**

(This form must be provided ONLY when making a filing that includes forms)

(Do not refer to the body of the filing for the forms listing, unless allowed by state.)

<b>1.</b>	<b>This filing transmittal is part of Company Tracking #</b>				
<b>2.</b>	<b>This filing corresponds to rate/rule filing number</b> (Company tracking number of rate/rule filing, if applicable)				
<b>3.</b>	<b>Form Name /Description/Synopsis</b>	<b>Form # Include edition date</b>	<b>Replacement Or withdrawn?</b>	<b>If replacement, give form # it replaces</b>	<b>Previous state filing number, if required by state</b>
01			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
02			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		

PC FFS-1

**RATE/RULE FILING SCHEDULE**

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)

<b>1.</b>	<b>This filing transmittal is part of Company Tracking #</b>	
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<b>2.</b>	<b>This filing corresponds to form filing number</b> (Company tracking number of form filing, if applicable)	
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☐ Rate Increase      ☐ Rate Decrease      ☐ Rate Neutral (0%)

<b>3.</b>	<b>Filing Method (Prior Approval, File &amp; Use, Flex Band, etc.)</b>	
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<b>4a.</b>	<b>Rate Change by Company (As Proposed)</b>
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Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)

<b>4b.</b>	<b>Rate Change by Company (As Accepted) For State Use Only</b>
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Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change	Minimum % Change

<b>5.</b>	<b>Overall Rate Information (Complete for Multiple Company Filings only)</b>
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		COMPANY USE	STATE USE
<b>5a</b>	<b>Overall percentage rate indication (when applicable)</b>		
<b>5b</b>	<b>Overall percentage rate impact for this filing</b>		
<b>5c</b>	<b>Effect of Rate Filing – Written premium change for this program</b>		
<b>5d</b>	<b>Effect of Rate Filing – Number of policyholders affected</b>		

<b>6.</b>	<b>Overall percentage of last rate revision</b>	
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<b>7.</b>	<b>Effective Date of last rate revision</b>	
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<b>8.</b>	<b>Filing Method of Last filing (Prior Approval, File &amp; Use, Flex Band, etc.)</b>	
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<b>9.</b>	<b>Rule # or Page # Submitted for Review</b>	<b>Replacement or withdrawn?</b>	<b>Previous state filing number, if required by state</b>
01		[ ] New [ ] Replacement [ ] Withdrawn	
02		[ ] New [ ] Replacement [ ] Withdrawn	
03		[ ] New [ ] Replacement [ ] Withdrawn	



October 22, 2008

Department of Insurance  
Property and Casualty Division  
Forms Review Section

Attn: Property and Casualty Division

RE: **Tokio Marine & Nichido Fire Insurance Co., LTD (U.S. Branch) – NAIC #3098-12904/FEIN #13-6108722**  
**Commercial Property**  
**Form Non-Adoption**  
**Filing Number: 08-AR-3-CF-25-1**  
**Effective Date: January 1, 2009**

To Whom It May Concern:

The captioned company is filing for your approval its form non-adoption submission. A letter permitting Westmont Associates, Inc. to submit this filing on the company's behalf is enclosed.

Please be advised that the Company would like to non-adopt the Commercial Property Coverage Part Multistate Water Exclusion Endorsement found in ISO filing number CL-2008-OWEFO. Please be advised that the Company is requesting an effective date of January 1, 2009.

Please note that a corresponding rule filing has been submitted under Company Filing #: 08-AR-2-CF-26-1.

Your approval and/or acknowledgement of this submission is respectfully requested.

Sincerely,

***Jennifer Waldron***

Jennifer Waldron

Supervisor

[jenb@westmontlaw.com](mailto:jenb@westmontlaw.com)

Enc.

Cc: R. Koping  
K. Armstrong



Tokio Marine Management, Inc.  
U.S. Manager and/or Manager for  
Tokio Marine & Nichido Fire  
Insurance Co., Ltd. (U.S. Branch)  
Trans Pacific Insurance Company  
TM Casualty Insurance Company  
TNUS Insurance Company

230 Park Avenue  
New York, New York 10169  
Phone: (212) 297-6600  
Main Fax: (212) 297-6062  
Claims Fax: (212) 297-6064

MILLEA GROUP

August 1, 2008

Re: Tokio Marine & Nichido Fire Insurance Co., Ltd. (U.S. Branch)  
NAIC # 3098-12904  
FEIN # 13-6108722  
Letter of Authorization  
Filing of Forms, Rates, and Rules

In accordance with applicable statutes and regulations of your state, Nancy Stepanski, Wesley Pohler, Jennifer Waldron, and Westmont Associates, Inc. are hereby authorized to file rates, rules, and forms on behalf of the Company.

Sincerely,

Pamela J. Olson  
Vice President – Corporate Underwriting